

## DEVELOPMENTAL LEAGUE

**Parks and Recreation Developmental League is where everyone is a winner!** This program focuses on building self-esteem, teamwork, and the basic fundamentals of basketball. Jump in and share a fun and positive experience with your child. Rules are modified to fit individual skill levels and enhance the ability for each player to learn and develop. All leagues are coed. Season includes weekly practices and games. The season concludes with an awards banquet. Teams practice two nights a week for the first two weeks of the season—then one night a week for the remainder of the season. Practices begin the week of October 19. Games begin the week of November 2 for grades 4–8; Saturday, November 7 for grades Pre-K–3.

Code	Grade	Game Day(s)	Date(s)	Time
35016-A	Pre-K	Sat.	11/7–12/19	TBD
35016-B	K–1	Fri./Sat.	10/19–12/19	TBD
35016-C	2–3	Fri./Sat.	10/19–12/19	TBD
35016-D	4–5	Tue./Sat.	10/19–12/19	TBD
35016-E	6–8	Thur./Sat.	10/19–12/19	TBD

**\$50/Pre-K, \$60/Grades K–8**

**Register by: Pre-K: 10/30, Grades K–8: 9/25**  
**Locations: Various**

### REQUIRED EVALUATION DAY • TWIN LAKES RECREATION CENTER, 1700 W. BLOOMFIELD RD.

Grade	Date	Time
Grades 2–3	9/26	11 a.m.
Grades 4–5	9/26	12:45 p.m.
Grades 6–8	9/26	1:45 p.m.

*There is no evaluation for grades K–1. Make-up session on Wed., Sept. 30 at 6 p.m. Teams are made by program staff after the Sept. 30 evaluation.*

## IU Women's Basketball Clinic

Tuesday, October 6 • 6–7 p.m.

Twin Lakes Recreation Center

**FREE** to all registered participants in both the Skilled and Developmental Leagues. It's a great way to warm up your skills before the season begins!

## SKILLED LEAGUE

This program focuses on basketball fundamentals along with the application of learned skills during game participation. If your child has a general understanding of the game, can dribble, shoot and pass, this is the league for you. The league offers divisions ranging from grades K–8. All leagues are coed up through grade 3. Girls play in a Girls Only League beginning in grade 4. Season includes weekly practices and games one night a week and an occasional Saturday. The season concludes with an awards banquet and single elimination tourney for each grade level. Teams practice two nights a week for the first two weeks of the season—then one night a week for the remainder of the season. Practices are held at Twin Lakes Recreation Center. Time and day are determined by the coach. Practices begin the week of October 19. Games begin the week of November 2.

Code	Grade	Game Day(s)	Date(s)	Description
35015-A	K	Wed.	10/19–12/19	Coed
35015-B	1	Mon.	10/19–12/19	Coed
35015-C	2	Tue.	10/19–12/19	Coed
35015-D	3	Wed.	10/19–12/19	Coed
35015-F	4–5	Tue.	10/19–12/19	Boys
35015-G	4–6	Tue.	10/19–12/19	Girls
35015-H	6	Mon.	10/19–12/19	Boys
35015-I	7–8	Thur.	10/19–12/19	Girls
35015-J	7–8	Thur.	11/9–12/19	Boys

**\$75**

**Register by: K–6: 9/25, Boys grades 7–8: 10/30,**  
**Girls grades 4–8: 9/25**

**Location: Twin Lakes Recreation Center**

### REQUIRED EVALUATION DAY • TWIN LAKES RECREATION CENTER, 1700 W. BLOOMFIELD RD.

Grade	Date	Time
Grades K–1	9/26	10 a.m.
Grades 2–3	9/26	11 a.m.
Grades 4–5	9/26	12:45 p.m.
Grades 6–8	9/26	1:45 p.m.
Girls	9/26	2:45 p.m.
Boys grades 7–8	11/3	6 p.m.

*Make-up session on Wed., Sept. 30 at 6 p.m.*

*Teams are made by program staff after the Sept. 30 evaluation.*

## PROGRAM REGISTRATION FORM

**Name** \_\_\_\_\_  
(parent/guardian if participant is under 18 or under legal guardianship)

**Home Phone** \_\_\_\_\_

**Street Address** \_\_\_\_\_

**Work Phone** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Emergency Contact** \_\_\_\_\_

**City of Bloomington Resident?** Yes No

**E-mail Address** \_\_\_\_\_

(If you are unsure of your residency status, please call 349-3700)

**How did you hear of this program?** Program Guide Newspaper Flyer Friend E-mail Web site Previous Participant Other \_\_\_\_\_

Participant Name	M/F	Birthdate	Shirt Size	Program Name	Class Code	Fee

### Inclusive Service Request:

Reasonable accommodations are needed to participate in above program(s) related to specific needs associated with a disability. (circle one) **YES NO**  
If **YES**, please complete an Inclusion Assessment and the Inclusive Recreation Coordinator will contact you. We request at least two weeks notification for reasonable accommodations requests. *In some cases reasonable accommodations may take longer.*

Include Your Voluntary Donation	\$1 _____
<input type="checkbox"/> Youth Scholarship Fund	\$3 _____
<input type="checkbox"/> Bloomington Tree Fund	\$5 _____
<input type="checkbox"/> Bloomington Park and Recreation Foundation	Other \$ _____

**Total Enclosed** \$ \_\_\_\_\_

### Method of Payment:

☐ Cash (do not mail cash) ☐ Check/Money Order

**Visa/Mastercard #** \_\_\_\_\_

**Expiration Date** \_\_\_\_\_

**Signature** \_\_\_\_\_  
(required if using credit card)

**Make check or money order payable to:**  
**City of Bloomington Parks and Recreation**

**Mail registrations to:**  
**City of Bloomington Parks and Recreation**  
**401 N. Morton Street, Ste. 250, Bloomington IN 47404**

The undersigned is the adult Program Participant, or is the parent or legal guardian of the Program Participant. The undersigned hereby states that s/he understands the activities that will take place in this program, and that the Program Participant is physically and mentally able to participate in this program. The undersigned recognizes, as with any activity, there is risk of injury. In the event that the Program Participant sustains an injury in the course of the program, and the City of Bloomington Parks and Recreation Department is unable to contact the appropriate person(s) to obtain consent for treatment, the City of Bloomington Parks and Recreation Department and/or its employees or volunteers are authorized to take reasonable steps to obtain appropriate medical treatment. The Program Participant and/or his/her parent or legal guardian shall be responsible for the cost of such treatment. The undersigned now releases the City of Bloomington, the Bloomington Parks and Recreation Department, its employees, agents, and assigns, from any claims including, but not limited to, personal injuries or damage to property caused by or having any relation to this activity. It is understood that this release applies to any present or future injuries and that it binds the Undersigned, Undersigned's spouse, heirs, executors and administrators. The Program Participant may be photographed and videotaped while participating in Parks and Recreation activities, and consent is given for the reproduction of such photos or videos for advertising and publicity.

I have read this release and understand all of its terms. I agree with its terms and sign it voluntarily.

**Signature** (parent/guardian if participant is under 18 or under legal guardianship) \_\_\_\_\_

**Date** \_\_\_\_\_

## PARENTS

### Parent Information Nights for both Developmental and Skilled Leagues:

September 9 or 14 • 6 p.m.  
Twin Lakes Recreation Center,  
1700 W. Bloomfield Rd. Ask questions about  
league rules, philosophy, and meet the staff.

## COACHES NEEDED!

### Mandatory New Coaches Information Session:

Wed., Sept. 16 at 6 p.m. or Thur., Sept. 17 at  
6 p.m. at Twin Lakes Recreation Center,  
1700 W. Bloomfield Rd.

### Mandatory Coaches Meeting:

Wed., Oct. 14, 6 p.m. or Thursday, Oct. 15 at  
6 p.m. at the Twin Lakes Recreation Center,  
1700 W. Bloomfield Rd. Must attend one of  
these two meetings.

**Volunteer coaches deadline: Sept. 11**

## SPONSORSHIPS

A variety of sponsorships ranging from individual  
to corporate are available. Contact Kim Ecenbarger  
at 349-3739 or [ecenbark@bloomington.in.gov](mailto:ecenbark@bloomington.in.gov).

## SKILLS CLINIC

This clinic is for boys and girls in grades K-8 who  
want to enhance their level of play or just learn more  
about the game. The clinic is run by Chris Ward, a  
former professional basketball player who currently  
works for the largest sports management company  
in the world. He trains high school student athletes,  
college players for the NBA pre-draft, and NBA  
players in off-season conditioning.

Code	Day(s)	Date(s)	Time	Grade
35017-A	Sat.	9/12	9 a.m.-Noon	K-2
35017-B	Sat.	9/12	2-6 p.m.	3-6
35017-C	Sun.	9/13	1-5 p.m.	7-8

**\$50 • Register by 9/9**  
**Twin Lakes Recreation Center,**  
**1700 W. Bloomfield Rd.**



CITY OF BLOOMINGTON  
parks and recreation



- **Skills Clinic**
- **Developmental League**
- **Skilled League**

**Call Leslie Brinson at 349-3735  
or Mark Sterner at 349-3768  
with program questions.**

**[www.bloomington.in.gov/parks](http://www.bloomington.in.gov/parks)**

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